U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	For Official Use Only
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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 2. Fiscal Year Covered From: 1	CMS UP						
3. Name and address of person filing. Name John A Schlagheck 4. Name, file number, and address of labor organization. Name Sheet Metal Workers' Local #33 Labor Organization File Number [517-801] P.O. Box, Bidg., Room No., if any Street 15146 Mermill Rd Street 15146 Mermill Rd City Rudolph State Ohio ZIP Code + 4 43462 State Ohio ZIP Code + 4 44115-273 5. Position in labor organization. Business Representative Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any 7.b. Amount.	1. File Number U -	2. Fiscal Year Covered From:					
Name John A Schlagheck Name Sheet Metal Workers' Local #33 Labor Organization File Number 517-801 P.O. Box, Bidg., Room No., if any P.O. Box, Building and Room Number, if any Street 15146 Mermill Rd City Rudolph City Cleveland State Ohio ZIP Code +4 43462 State Ohio ZIP Code +4 44115-273 5. Position in labor organization. Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of mometary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.		1 / 1 / 2004 Through: 12 / 31 / 2004					
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P.O. Box, Bldg., Room No., if any Street 15146 Mermill Rd Street 3666 Carnegie Ave City Rudolph State Ohio ZIP Code + 4 43462 State Ohio ZIP Code + 4 44115-271 5. Position in labor organization. Business Representative Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. 6. Name and address of Employer (including trade name, if any). 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.	Name John A Schlagheck	Name Sheet Metal Workers' Local #33					
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P.O. Box, Bidg., Room No., if any 7.b. Amount.	Name						
7.b. Amount.	Trade Name, if any:						
Street	P.O. Box, Bidg., Room No., if any						
City \$0	Street	7.b. Amount.					
	City	\$0					
State ZIP Code + 4	State ZIP Code + 4						
Signature							
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)							
Signed On 08/10/2005 419-686-6222	\mathcal{O}	.					
Date Telephone Number	Signed John Schlalett	On 08/10/2005 419-686-6222					

Name of Person Filing John Schlagheck	File Number U-						
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.							
8. Name and address of Business (including trade name, if any). Name Joint Apprenticeship Training Committee Trade Name, if any: Sheet Metal Workers P.O. Box, Bldg., Room No., if any Street 27430 Crossroads Pkwy City Rossford State Ohio ZIP Code + 4 43460	9. Business deals with: a. Labor Organization b. Trust c. Employer						
10. if 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.						
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	Training Apprentices						
	11.b. Approximate dollar value of such dealing.	\$500,000					
City	12.a. Nature of interest held or income received.						
State ZIP Code + 4	Educational Seminar Reimbursement						
	12.b. Amount.	\$949					
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.							
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	4					
Name		Alternative and the second					
Trade Name, if any:		-					
		To the second se					
P.O. Box, Bldg., Room No., if any		A Selection of Sel					
Street		THE STATE OF THE S					
City		положения в положе					
State ZIP Code + 4		A 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10					
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	\$0					

Name of Person Filing John	n Schlagheck	File Number U-	

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Toledo Area Sheet Metal Workers Pension Plan	a. Labor Organization		
Trade Name, if any: Sheet Metal Workers			
DO DO DIA DO N. Y.	b. Trust		
P.O. Box, Bldg., Room No., if any P.O. Box 697 suite 300	browning.		
Street 1600 Madison Ave	c. Employer		
City Toledo			
State Ohio ZIP Code + 4 43697-0697			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name	Provides Pensions for Retired Memb	ers	
		- VALUE CONTRACTOR CON	
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
		milymy, masses see	
City		American	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.		
	12.a. Nature of interest held or income received.	en interpresentation and the second s	
	Educational Seminar Reimbursement		
		A Constitution of the Cons	
		and control of the co	
		ANY Andrewson's re-	
		Territorial de la constitución d	
		ATTENDED	
	12.b. Amount.	\$589	

The transactions, dealings and interests that are detailed in the attached LM-30 Report represent my good faith effort to reconstruct the reportable occurrences for the period of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will immediately file an amended LM-30 Report.

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Date/